

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

Reset Form

*Marion*

FORM DR-2 Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	13384
Logged In	<i>pb</i>
Scanned	
Computer	<i>pb</i>
Audited	

COMMITTEE NAME (Must be same as on Statement of Organization)

*Kelley for Mayor*

ETHICS & CAMPAIGN  
DISCLOSURE BOARD

OCT 18 2003

FILED EMAILED

IMPORTANT: Indicate type of committee you are reporting for: ☒ 4

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate  
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee  
(8) Support State of Candidates

### CANDIDATE COMMITTEES ONLY:

Candidate Name

*Craig Kelley*

Political Party

Office Sought

*Mayor Knoxville*

District (if Senate or House)

*RJ Janowick*  
SIGNATURE OF TREASURER (or person filing this report)

*641-842-3711*  
TELEPHONE

*10/17/03*  
DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

### SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A *Oct 19 Report* REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date)

Indicate one ☐

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election
<i>Nov 4, 2003</i>
County & Local Committees, enter County in which Election is held
<i>MARION</i>

### STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

\$ *840.00*

### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

*415.00*

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL .... \$

*1255.00*

### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

*S/B 407.00 407.60*

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

*S/B 848.00 847.40*

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

*103.75*

### CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☒ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

Reset Form

FORM  
DR-2

Rev. 07/2003)

DISCLOSURE  
REPORT

COMMITTEE NAME (Must be same as on Statement of Organization)

Kelley for Mayor

IA ETHICS & CAMPAIGN  
DISCLOSURE BOARD

IMPORTANT: Indicate type of committee you are reporting for:

4

OCT 18 2003

( 1 ) Statewide/Legislative Candidate ( 2 ) Statewide PAC ( 3 ) State Party ( 4 ) County/Local Candidate  
( 5 ) County PAC ( 6 ) Ballot Issue/Franchise Committee ( 7 ) County/City Central Committee  
( 8 ) Support State of Candidates

### CANDIDATE COMMITTEES ONLY:

Candidate Name

Craig Kelley

Political Party

Office Sought

Mayor Knoxville

District (if Senate or House)

### For Office Use Only

Comm. #

13384

Logged In

Scanned

10.20.03

Computer

Audited

SIGNATURE OF TREASURER (or person filing this report)

TELEPHONE

DATE SIGNED

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(report date)

Indicate one ☐

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

Nov 4, 2003

County & Local Committees, enter County in  
which Election is held

MARION

### STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held  
by the committee. This amount **MUST** be the same as the cash on hand at the end  
of the last reporting period, or must be zero if this is first report filed.)

\$ 840.00

### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below)

415.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL .... \$

1255.00

### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

S/B 407.00 407.60

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report, balance must  
be zero) (Attach DR-3)

S/B 848.00 847.40

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

### CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES

☒ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Kelley for Mayor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/16/03	ID# CK# 93	Richard Janousek 1601 W Jackson Knoxville Ia 50138	Stamps 114 @ .37 = \$42.18 2 Boxs envelopes = 5.12 s	
	ID# CK#		Voters list Marion County = \$7.16	
	ID# CK#		Voter labels \$ Marion County 33.34	\$87.80
10/17/03	ID# CK# 94	Home town News 301 E Main Knoxville Ia 50138	Political Ad 2 ads	\$187.20
10/17/03	ID# CK# 95	Knoxville Journal Express 122 E Robinson St Knoxville Ia 50138	Political Ad 2 ads	\$132.00
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL

\$

TOTAL (if last page of this schedule)

S/B 407.00

\$ 407.60

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(i).)

Page 1 of 1

(for Schedule B)

For Instructions, See Back of Form

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS



CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Kelley For Mayor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/6/03	ID# CK#	Steve Gould 1103 McKimber Drive Knoxville Ia 50138		\$ 50.00	<input type="checkbox"/>
10/6/03	ID# CK#	Launa Jamison 409 S 4th Knoxville Ia 50138		\$50.00	<input type="checkbox"/>
10/8/03	ID# CK#	Jack Grogk 214 E Jefferson Knoxville Ia 50138		\$25.00	<input type="checkbox"/>
10/9/03	ID# CK#	Dave Johnson 1209 South 5th Knoxville Ia 50138		\$25.00	<input type="checkbox"/>
10/10/03	ID# CK#	Jim DeVore 1961 W Jackson St Knoxville Ia 50138		\$75.00	<input type="checkbox"/>
10/10/03	ID# CK#	John Kemerick 1012 E. Compertine Knoxville Ia 50138		\$25.00	<input type="checkbox"/>
10/11/03	ID# CK#	Bobbi Osborn 1801 W Jackson St Knoxville Ia 50138		\$25.00	<input type="checkbox"/>
10/14/03	ID# CK#	Randy Flack 1702 W. Grandview Knoxville Ia 50138		\$25.00	<input type="checkbox"/>
10/14/03	ID# CK#	Ray Todd 1814 W Jackson St Knoxville Ia 50138		\$25.00	<input type="checkbox"/>
10/2/03	ID# CK#	Unitarized		\$20.00	<input type="checkbox"/>

SUB-TOTAL

\$ 345.00

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2  
(for Schedule A)

## Reset Form

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

Kelley for Mayor

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/8/03	ID#  CK#	Unitemized		\$ 20.00	<input type="checkbox"/>
10/15/03	ID#  CK#	Kathy Harikema 109 N Park Lane Knoxville TN 37618		\$ 50.00	<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 345.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 415.00 ✓	

Page 2 of 7  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Kelley for Mayor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
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	ID# CK#		Voters list Marion County = \$7.16	
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10/17/03	ID# CK# 94	Home town News 301 E Main Knoxville Ia 50138	Political Ad 2 ads	\$187.20
10/17/03	ID# CK# 95	Knoxville Journal Express 122 E Robinson St Knoxville Ia 50138	Political Ad 2 ads	\$132.00
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL

\$

TOTAL (if last page of this schedule)

S/B 407.00

\$ 407.60

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

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Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Kelley for Mayor

Reset Form

SCHEDULE <b>E</b> (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	IF FOR FUND-RAISER CONTRIBUTION
10/6/03	Craig Kelley Knoxville Ia 50138	Candidate	Sign painting by Forrest d Harrington Knoxville Ia.	\$ 88.00	<input type="checkbox"/>
					<input type="checkbox"/>
10/11/03	Craig Kelley Knoxville Ia 50138	Candidate	Wire for signs from H&M Farm	150.73	<input type="checkbox"/>
			Supply Sagorney		<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$

TOTAL (if last  
page of this  
schedule)

\$ 103.73

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)